2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 748275

1. Entity Name

Suite, Apt. #, etc.

City & State

Zip

TAMIAMI VILLAGE CONDOMINIUM ASSOCIATION, INC.

Country



Apr 17, 2003 8:00 am Secretary of State 04-17-2003 90642 004 ****61.25

FILED

Principal Place of Business	Mailing Address	
1131 S.W. 105TH AVE. MIAMI FL 33174	2026 S.W. 1ST STREET STE. 6 Miami Fl 33135	
2. Principal Place of Business	3. Mailing Address	

Suite, Apt. #, etc.

City & State

CHECK HERE IF MAKING CH	ANGES
4. FEI Number 59-1946443	Applied For
30 10-1-10	Not Applicable
5. Certificate of Status Desired	. 75 Additional Required
7. Name and Address of New Registered Age	<u>it</u>
O. Box Number is Not Acceptable)	
FI	Zip Code

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent		
	Name		
DE LA RIONDA, CARLOS 2026 S.W. 1ST STREET STE. 6	Street Address (P.O. Box Number is Not Acceptable)		
MIAMI FL 33135	City FL Zip Code		
 The above named entity submits this statement for the purpose of changing its register the obligations of registered agent. 	ed office or registered agent, or both, in the State of Florida. I am familiar with, and accept		

OLONIATURE	· ·			
SIGNATURE	Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Registered Agent signature required when reinstating)	DATE	
	Signature, typed or printed marile or registered agent and the it applicable.	(10) E. Hegistered regent aignotere required when rematating	SAIL .	

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing Trust Fund Contribution.

Added to Fees

Make Check Payable to Florida Department of State

10.	OFFICERS AND DIRECTORS		11.		S TO OFFICERS AND DI	RECTORS IN	10
TIŢLE	DVP	Delete	TITLE	DIRECTOR PRE	31 DENT	🚰 Change	Addition 🔣
NAME	MORALES, BERNICE	′	NAME	MIGUEL A. Z.	AMURA -05	•	
STREET ADDRESS	1121 S.W. 105 AVENUE #303		STREET ADDRESS	1141 SW. 10	5,400 \$ 303		
CITY-ST-ZIP	MIAMI FL 33174		CITY-ST-ZIP	MIGUEL A. Z. 1141 SW. 10 MICANIX	Herida 331	<i>14</i>	
TITLE	DV	☐ Delete	TITLE	,		Change	☐ Addition
NAME	ABREU, EPIFANIO		NAME				
STREET ADDRESS	1001 SW 105 AVE #108	and the second	STREET ADDRESS	14963 G.W.	60 STREET	_	
CITY-ST-ZIP	MIAMI FL 33174	معالمات والمنصيف ومدر	CITY-ST-ZIP-	14963 g.W.	Loudy 3319	<i>13</i>	
TITLE	DS	⊠ Delete	TITLE	DIRECTOR / SECI	retary .	Change	Addition
NAME	CANIZARES, LUIS B		NAME	HOREWSIA C	ELA RIONDA		ļ
STREET ADDRESS	1111 SW 105TH AVE #613		STREET ADDRESS	P.O. BOD 3	41		
CITY-ST-ZIP	MIAMI FL 33174		CITY-ST-ZIP	MIAMI How	cda 33135		
TITLE	DP	☐ Delete	TITLE	DIRECTOR/TREA		Change	Addition
NAME	OTANO, PEDRO		NAME	7			
STREET ADDRESS	1001 SW 105 AVE #116		STREET ADDRESS				
CITY-ST-ZIP	MIAMI FL 33174		CITY-ST-ZIP				
TITLE	DT	⊠ Delete	TITLE	DIRECTOR / ASSI CRISTOSAL L 1011 J.W. 103	VIP.	Change	Addition
NAME	WEVERSON, CORREIA	-	NAME	MUSHBAL L	USAN		
STREET ADDRESS	1151 SW 105 AVENUE #402		STREET ADDRESS	1011 7 W. 105	sue # 200		Í
CITY-ST-ZIP	MIAMI FL 33174		CITY-ST-ZIP	MIAMI A	orida 33174	1	,
TITLE	DT	🔀 Delete	TITLE			☐ Change	☐ Addition
NAME	Martinez, Juan R		NAME				
STREET ADDRESS	1151 S.E. 105 AVENUE #405		STREET ADDRESS				
	LHALM EL AGAMA						

12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an appears and wher like empowered.

SIGNATURE:

4/14/2003